



Advance Africa Workshop Report

Nigeria

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Prepared By:

Dr. Judith Walker, Consultant, Advance Africa

Belkis Giorgis, Senior Technical Advisor Gender and Adolescent RH

Advance Africa Project



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Acknowledgements

We would like to acknowledge the assistance of USAID for supporting this workshop and NGONetworks for collaborating with Advance Africa. The workshop provided an opportunity for donors and networks to exchange valuable experiences, network and identify future areas of collaboration. Advance Africa would like to extend its gratitude for those who came and participated in this workshop. We hope that there will be opportunities for further collaboration.

Saul Helfenbein

Director
Advance Africa Project

SUMMARY

With support from the Africa Bureau NGO Networks, conducted the documentation of Nigerian women's networks, which had integrated different aspects of FP/RH into their activities. The dissemination of the report provided the basis for Advance Africa to hold a follow up workshop with the representatives of the networks, Bi-lateral donors, USAID, and the public sector.

The workshop provided a forum for major stakeholders to identify potential constraints and possibilities for effective integration of RH/RR into women's networks. The follow on workshop by Advance Africa examined the following:

- What are the major competencies needed to develop the capacity of women's networks to integrate RH into their networks?
- How can health networks support non-health women's networks achieve their objectives?
- What new challenges does the HIV/AIDS epidemic pose to women's networks?
- How can women's networks make their activities more effective in meeting Adolescent reproductive health needs?

To achieve these objectives, the workshop identified and reached consensus among participants on major categories of types of women's networks and RH components. Working group sessions were organized based on the classification of networks to answer and provide feedback on a list of questions prepared by Advance Africa to serve as a guide for discussion. The perspectives of each

group was represented and reported to the plenary. Issues critical in building competencies to help women's networks identify critical gaps in building capacity and providing the necessary support in those areas were recorded.

Themes such as networking strategies, monitoring and evaluation for collaborative projects and advocacy strategies for networking with state agencies were identified as the common issues that all the networks wanted to benefit from. The need to link women's professional health associations with those willing to integrate RH programs, closer coordination and collaboration among the different networks and how to address the impact of HIV/AIDS was a major focus of the discussions. The strategies identified by women's networks are directly related to their own potential, which they understand based on the particular and dominant activities they engage in. The different strategies that were used by the networks reflect their need to respond to their organizational base. Participants also discussed selection of networks for donor funding and transparency in resource allocation.

For Advance Africa, the workshop provides a rich source of information for building its strategic mapping tools and methodologies on how to increase stakeholder participation among non-traditional health networks. Secondly, based on this workshop Advance is in the process of identifying networks that it hopes to either integrate or strengthen service delivery capacity for improving quality and access to RH within the context of HIV/AIDS. The evaluation of the workshop by the participants is also included in the appendix and demonstrates that the approach in using women's networks is indeed one that has great potential.

OBJECTIVES

The Advance Africa Module Development Workshop was held at the Comfort Royale Hotel in Abuja, Nigeria on Wednesday 19th September 2001. A total of 53 participants representing women's networks, donors, Ministry of Health Representatives USAID and other bilateral attended this workshop. The attendance list is attached as Appendix I.

The overall objectives of the Workshop were as follows:

- To identify best practices gain a better understanding of how to integrate reproductive health activities into non-reproductive health NGOs
- To identify the constraints and limitations faced by NGOs and NGO networks when trying to introduce RH activities
- To identify needs and requirements of NGOs and NGO networks for the integration of RH into their activities
- To come up with best practices and a better understanding of how to incorporate HIV/AIDS activities into the activities of different types of NGOs and Networks

- To develop models and identify strategies which constitute as the critical components of initiating a module for integrating FP/RH into women's networks

BACKGROUND

The Advance African Workshop with representatives of women's networks in Nigeria is a preliminary step towards improving the capacity of women's to increase access and quality of reproductive health and information. The regional, ethnic, cultural and religious complexity of Nigeria and the groups that have evolved out of this environment provides a wide array of approaches and strategies, Advance Africa hopes that this will be useful as best practices for adaptation for the rest of Africa. In the context of the HIV/AIDS epidemic and the alarming rates of infection among youth, women's networks have also incorporated these issues as part of their FP/RH agenda.

The documentation of women's networks in Nigeria by NGO Networks for Health and the Dissemination Workshop conducted provides an excellent opportunity to start the process of analysis of this process. In consultation with the mission and in partnership with NGO networks, Advance Africa took the opportunity to continue the dissemination of the document by conducting a one day workshop. The dissemination of the document that was prepared by NGO networks was a synthesis of four regional reports and three thematic sections: demographic, gender and RH, and democracy and governance. The two day dissemination workshop did not address all these themes in great detail accordingly participants were especially happy to have a follow on workshop to discuss the gender and RH aspects of their activities. The Advance Africa workshop was intended to start examining the process of integration of FP/RH in the context of HIV/Aids in the activities of women's groups with the major stakeholders.

ACTIVITIES

The workshop was participatory and was organized to get maximum input from all participants. To facilitate the discussion and identify models to work different categories for the networks were first established. The second part of the discussion was to define the various aspects of reproductive health and identify those, which the workshop will focus on. The third activity consisted of working group discussions on the classifications that were agreed upon using a set of questions as guidelines for identifying strategies and approaches. Details on each set of activities follow.

Activity I. The first challenge of the workshop was to try to establish a framework for participants to develop models of integration given the different perspectives and activities of the women's networks that were represented in the workshop. A significant number of representatives of NGOs resisted classifying their organization as one specific type of association. Participants debated where their organizations fit since most networks have multiple objectives and activities. Finally it was agreed that their classification should be based on the dominant activity of the network at the time of formation. At the end of this session participants agreed that their organizations could be classified as a specific sub-type of network.

1. Faith based organizations
2. Women's interest organizations
3. Economic empowerment organizations
4. Health organizations
5. Research organizations
6. Women's Rights Organizations

ACTIVITY II

The next activity related to understanding the different components of RH. NGO Networks documentation showed the range of reproductive and family planning activities conducted by networks ranged from BCC to delivery of clinic based family planning activities. Thus it was necessary for all participants to come to a consensus on what constitutes FP/RH activities. Two Senior Officials from the Federal Ministry of Health (FMOH) conducted this session to help participants place RH/FP within a context of Nigerian health policy. Eleven components of Reproductive Health are recommended by the World Health Organization. The Federal Government of Nigeria has accepted eight of the eleven as comprising of RH.¹ While the participants reached a consensus to discuss 8 of the components, reproductive cancers gender issues, and infertility were omitted from the discussion.

Activity III. The Integration RH/RR Group work Session

The working group session focused on selecting models, strategies and components that could be used to develop a manual on integrating RH into non-RH networks and HIV/AIDS into non-HIV/AIDS focused networks. The working groups discussed the challenges of non-health NGOs working in reproductive health and strategies of integrating RH into non-health NGOs and HIV/AIDS into both health and non-health NGOs in regard to the following questions.

1. What are the potential benefits in integrating FP/RH activities in women's network activities?
2. How do you measure those benefits?

¹ WHO Recommended Components are the following: (1) Safe motherhood; (2) HIV/AIDS/STI; (3) Family Planning; (4) Adolescent sexual and RH problems; (5) Elimination of HTP (e.g. VVF); (6) Gender Issues; (7) Reproductive Cancers; (8) Male involvement in RH; (9) Reproductive rights; (10) Infertility; and (11) Post Abortion care.

3. What are the different ways through which this integration can take place? (This will look at the different types of networks through case studies which will be developed by the networks)
4. What are the constraints that women's networks have faced in integrating FP/RH in their activities?
5. What recommendations and suggestions can be made regarding integration of FP/RH activities in women's networks?
6. Donor perspectives and experience in funding such initiatives?
7. How new challenges are being brought to fore because of the HIV/Aids epidemic and the increase in adolescent sexual activity?

FINDINGS

The workshop brought out critical issues, which need to be addressed if women's networks are to reach the potential they have in improving their own lives as well as those of their communities. The gender and reproductive rights focus of the reproductive health agenda has indeed helped the inclusion of women's networks and groups as central players in the field. However with these new role women's network were given responsibilities, which require a new set of competencies and expertise. Commitment to improving women's lives through collective action can be a powerful factor in ensuring success. However, integration of reproductive health activities in non-health settings requires capacity, skills and resources that are not readily available for various reasons. Perhaps one of the serious misconceptions that have plagued gender-based activities is the assumption that commitment, volunteerism and goodwill will somehow compensate for investments in technical capacity building, human resource mobilization and retention and supervision to maintain quality which is required by other "health related activities"

The results of the working group are summarized in the following two tables. The first table looks at the Strengths, Obstacles, Strategies, and challenges that women's networks face in integrating FP/RH. The second table identifies key steps, competencies, linkages and donor perspectives in building capacity of women's networks to improve their effectiveness. Considering the brevity of the workshop, a great deal was accomplished due to the extensive background preparations that were completed prior to the meeting, the excellent facilitation, organization skills of the local consultant, and the background discussions that had already prepared the ground for a more in-depth analysis of specific models and strategies

Table 1: Strengths, Challenges and Strategies for Success

Type of Organization	Discussion Topics			
	Strengths	Obstacles/ Constraints	Strategies for Integration	HIV/AIDS Challenges/ Responses
Faith Based	<p>Support of traditional leaders</p> <p>Credible and Respected, with a broad reach</p> <p>Often have infrastructures available for service delivery;</p> <p>Ability to advocate, among large populations</p> <p>Sustainable</p>	<p>Power of religious leaders to resist FP/RH activities</p> <p>Religious interpretation of doctrine male dominated</p> <p>Dominated by male religious leaders</p>	<p>Mainstream separate RH programs into one</p> <p>Program community funded rather than foreign funded when possible</p> <p>Integrate RH programs gradually to gain acceptance</p>	<p>Religious groups are 'preaching the word of hope' instead of damnation,</p> <p>Learning/ teaching about health issues in a scientific way</p> <p>Many (Christian groups in particular) are mandating HIV-testing before marriage.</p>
Women's Interest	<p>Wide coverage with many women members</p> <p>Composed of many levels with reaches to the local government.</p>	<p>Funding constraints</p> <p>Language barrier,</p> <p>Poor accountability,</p> <p>Leadership problems,</p> <p>Loss of identity,</p> <p>Subject to political abuse</p>	<p>Funding for RH programs should be equal to that of other programs</p> <p>Easier for Networks proclaiming women's interest to collaborate with MOH or health NGOs</p>	<p>Women must remember their children and become involved,</p> <p>Adolescent programs are being developed and require support</p>
Economic Empowerment	<p>Financial autonomy from husbands</p> <p>Resources to access health care also (RH)</p> <p>Ability to make autonomous decisions</p> <p>Self – reliant, innovative, flexible</p>	<p>Management/Administrative /problems</p> <p>Corruption, poor documentation,</p> <p>Inadequate skills and capacities</p>	<p>Require those participating in economic programs to pay for RH services which are being integrated for sustainability</p>	<p>Condoms are being sold in the market for wider access</p> <p>Women are even selling condoms.</p>

Health	<p>Have better opportunity to increase male involvement</p> <p>Professional touch i.e. skills and expertise</p> <p>Linkage with public sector stronger therefore government support</p> <p>Engage in pilot activities</p>	<p>Not interested in other programs</p> <p>Do not traditionally reach out to other women's groups,</p> <p>Resistant to non-professionals working in health activities</p>	<p>Health networks do not have much experience with integration.</p>	<p>Health NGOs have to consider the role of traditional medicine</p>
Research	<p>They view women's issues as gender issues.</p> <p>These are knowledgeable groups,</p> <p>Tend to be autonomous-Issue driven, Capable of networking with a wide spectrum of group</p>	<p>No confidence in research,</p> <p>Expensive organizations to run,</p> <p>Donor driven</p> <p>They follow the money</p>	<p>Health and non-health researchers on research team</p>	<p>Search on the cultural factors driving the epidemic</p>
Women's Rights	<p>Advocacy and legislative skills,</p> <p>Better educated and skilled in writing proposals</p> <p>Network more effectively with international and local organizations</p>	<p>Lack of funding, militancy, activism</p>	<p>Use of the media</p>	<p>Greater interest in inheritance rights</p>

Table 2: Key Steps, Competencies, Linkages and Donor Perspectives

Type of Organization	Discussion Topics			
	Key Steps for Introduction of Programs	Key Competencies	Linkages	Donor Perspective for Capacity Building
Faith Based	Preparing the ground, advocacy of potential opposition stakeholders	Advocacy competencies	A forum created for experience sharing	Perspectives should be flexible, not standard and should be culturally sensitive
Women's Interest	Create awareness with women beneficiaries, Coalition building, Exchange visits Use of affiliate groups	Health professionals as members	Meetings	-Advocacy training Donor support for capacity building for integration
Economic Empowerment	Fund raising	Better understanding of: health problems, training of Primary Health Educators Work more effectively with men and community leaders as to promote women's health.	Networking meeting or donor forums	Training is needed Support for meetings
Health	The usual steps are followed for RH, since it is part of the health network. It is easier for health networks to carry out RH. Provide information professionally	Gender and social science training	Professional meetings	Donors need to provide new information about RH/RR issues
Research	Needs assessment and information dissemination	Gender training	Dissemination workshops	Support for research before programming

Women's Rights	Rapid response to problems, sometimes no steps followed	Legal knowledge and interest in other aspects of women's problems	Debates in the media	We need more information about international rights cases
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FOLLOW-UP/NEXT STEPS

Given the basic foundation that has been built through this workshop, Advance Africa envisions the process to include the following outcomes:

- (1) The information from this workshop will provide the basis for developing guidelines on ways to promote integration of FP/RH into women's networks, strengthening existing integration activities, and building competencies and partnerships with women's networks. Advance Africa will utilize results of the findings of the workshop to develop strategic mapping tools as part of the strategic mapping exercises that is in the process of being developed.
- (2) In collaboration with CAFS, which has a strong gender-training program, Advance Africa will develop guidelines and kits can be used to help in identifying the different issues that women's networks face and the recommendations that will be made in addressing these constraints.
- (3) Advance Africa will select two to three networks in Nigeria and develop a plan of action to integrate FP/RH in the context of HIV/AIDS epidemic. The process of integration will include identifying the strengths and weakness of the networks and designing of interventions to address these gaps. As part of this process Advance Africa will develop case studies, which will inform other, groups who are interested in replicated this process.

Appendix I: List of Participants and Organizations Represented

S/N	NAME OF REPRESENTATIVE	STATE REPRESENTED	ORGANIZATION REPRESENTED
1	MRS F.N.E.D.E SOUZA	NATIONAL	WOMEN'S HEALTH ORGANISATION OF NIGERIA
2	MISS MERCY STEPHEN	NATIONAL	NURSING & MIDWIFERY COUNCIL OF NIG.
3	CHIEF (MRS) BEMICE A. KOLADE	OSUN STATE	WOMEN AND DEVELOPMENT MOVEMENT
4	GRACE E. DELANA	A. OYO STATE	ASSOCIATION FOR REPRODUCTIVE AND FAMILY HEALTH, IBADAN
5	MRS DINATU OTHMA	NATIONAL	NATIONAL COUNCIL OF WOMEN SOCIETIES, ABUJA
6	MRS G. O OKUEKE	IMO STATE	WOMEN'S HEALTH DEPT. MINISTRY OF HEALTH.
7	MR AKIN ALOBA	LAGOS STATE	AWOSDA LAGOS
8	DR CHARITY VSIFOH	LAGOS STATE	COALITION OF NIGERIAN NGOs ON HEALTH, POPULATION AND DEVELOPMENT
9	CLARA TYOSAR	PLATEAU STATE	INTER-GENDER, JOS
10	SALOME C. DASHE	PLATEAU STATE	NATIONAL COUNCIL OF

			WOMEN SOCIETIES, PLATEAU BRANCH
11	SHERIFAH TALEAT ABAYOMI	OYO STATE	RESOURCE PERSON/ COUNTRY WOMEN ASSOCIATION OF NIGERIA
12	DEREX BRIGGS IZEOWA	NATIONAL /	RESOURCE PERSON (F.M.O.H.) (N.A.S.C.P.)
13	DR ODEKU	NATIONAL	FMOH- RH
14	BEN C. N. WOBI		NASCP-FMOH ABUJA
15	OLUSINA FALANA	NATIONAL	FAMILY HEALTH INCORPORATED, NIGERIA/ USAID
16	EKWUGHA EDITH (MRS)	PORT HARCOURT	THE ADOLESCENT PROJECT
17	JESSICA VANKAT	PLATEAU STATE	COUNTRY WOMEN ASSOCIATION OF NIGERIA JOS
18	JAMILA IBRAHIM YAHAYA	NATIONAL	MUSLIM SISTER ORGANIZATION
19	NNUKA NDIOMU	NATIONAL	CENTER FOR DEVELOPMENT AND POPULATION ACTIVITIES - USAID NIGERIA
20	CIYARTA D. POSI (MRS)	PLATEAU STATE	CHURCH OF CHRISTIAN NIGERIA WOMEN, JOS
21	HAJI SA'ADATU MUSA	KANO STATE	GRASSROOTS HEALTH ORGANIZATION OF

			NIGERIA
22	MAD UBA HELEN ADAKU	NATIONAL	CISGHAN STOP AIDS
23	KHADIJAH I.	KANO STATE	ADOLESCENT HEALTH INFORMATION PROJECT
24	AISHA SULEMAN	NATIONAL	NIGERIA ASSOCIATION OF WOMEN'S JOURNALISTS
25	HELEN R. JAMMAL	BAUCHI	WOMEN DEVELOPMENT PROGRAM
26	MS NIMI THOM- MANUR	NIGERIA	NATIONAL COUNCILS OF WOMEN'S SOCIETIES
27	VICKI ADUDU	LAGOS	SOCIETY FOR WOMEN AND AIDS IN AFRICA, NIGERIA
28	HAJIYA BILKISU	NATIONAL	FEDERATION OF MUSLIM WOMEN ASSOCIATION
29	JANE OSAGIE	EDO- STATE	INTERNATIONAL REPRODUCTIVE RIGHT RESEARCH ACTION GROUP.
30	JOY OGBAZI	ENUGU STATE	WOMEN AID COLLECTIVE
31	MODUPE OGinni	OYO STATE	COMMUNITY WOMEN AND DEVELOPMENT IBADAN

32	PALIENCE NYONG	OWERRI	WOMEN IN AID AND DEVELOPMENT
33	ELIZABETH PACHECO	LAGOS STATE	HSC/FEDERATION OF FEMALE NURSES AND MIDWIFE
34	CHIEF (MRS) BISI OGUNLEYE	NATIONAL- ONDO STATE	COUNTRY WOMEN ASSOCIATION OF NIGERIA
35	OKEKELU CHINEDU	ANAMBRA STATE	WOMEN DEVELOPMENT PROJECT CENTER.
36	DR J.C. OKEBUNOR	SOUTH EAST	CONSULTANT- UNIVERSITY OF NIGERIA NSUKKA [SOUTHEAST CONSULTANT]
37	EGWU, SAM G	MIDDLE BELT	CONSULTANT UNIVERSITY OF JOS [MIDDLE BELT CONSULTANT]
38	SOPHUE B OLUWOLE	SOUTH WEST	RESOURCE PERSON UNIVERSITY OF LAGOS
39	C. OHIRI ANICHE	SOUTH WEST	RESOURCE PERSON UNIVERSITY OF LAGOS
40	SADE TAIWO	SOUTH WEST	CENTER FOR ENTERPRISE DEVELOPMENT AND ACTION [SOUTH WEST CONSULTANT]
41	DENNIS ITYARYAR	MIDDLE BELT	RESOURCE PERSON

			UNIVERSITY OF JOS/INTER GENDER JOS
42	MRS TITILAYO AJAMAKU	NATIONAL	REPRESENTATIVE TO THE PRESIDENT AND WOMEN AFFAIRS
43	OYEBOLA FOYINSOLA	NATIONAL	USAID METRO PLAZA, ABUJA
44	AMIESIMAKA F. A (MRS)	NATIONAL	INTERNATIONAL FEDERATION OF WOMEN LAWYERS
45	DR ODEKU MOJISOLA	LAGOS STATE	RH/CDPA (FMOH)
46	DR OSUBORE MATTHINS KASIM		PATHFINDER, INTERNATIONAL USAID
47	MRS CHARITY IBEAWUCHI	NATIONAL	POLICY PROJECT NIGERIA
48	MRS JOSHUA A. EMMANUEL	NATIONAL	UNIFEM,
49	MODIBBO A. A FATIMI	KANO	MUSLIM SISTERS ORGANSATION
50	AMINA SAMBO		GHON
51	LIZ AKINBULUMO	NATIONAL	IRC/PAS AMERICA EMBASSY
52	TOYIN OYEBOLA	ABUJA	USAID- NIGERIA
53	DR YAHAYA HASHIM	KANO	NORTHERN CONSULTANT - dRPC

Appendix II: Evaluation of Workshop by Participants

S/N	Name of Organisation	How long with Organisation	Ever attended Work-shop	Sex	Importance of Developing Manual	Importance of Integrating HIV/AIDS with health NGO
1	COWAN-National Akure	19 Years	Yes	F	Very necessary	It is necessary
2	IRRRAG-Nigeria	8 Years	Yes	F	It is good and Important	It is a good idea to integrate it into health NGOS
3	WOMEN'S AID Collective (WACOL)	4 Years	Yes	F	Very Important	Very Important
4	CEDPA - USAID	41/2 Years	No	F	To enable NGOs integrate RH into the activities	To stem the spread of the disease
5	NCWS	21 Years	No	F	It gives the guidelines on how to go about the organisation	Because of its prevalence nature in the country
6	Nursing & Midwifery council of Nigeria	6 Months	No	F	The Idea is okay	Good Idea
7	NCWS Plateau	10 Years	No	F	Great	Very Important
8	Resource person	5 Years	Yes	F	It will helps the NGOs to be move focus	It enables the health organization to disseminate useful information for greater impact and maximum
9	HSC/FENAM	8 Years	Yes	F	Very necessary	Importance as it is part really part of RH
10	FMOH	12 Years	Yes	F	Manual not really developed	Very Important
11	FOMWAW	16 Years	Yes	F	Very necessary	Very important because it is a pandemic that spares no one
12	NASCP, Dept Pub. Health FMOH Abuja	23 Years	No	M	Absolute Necessity	Mandatory need / requirement

13	ARFH	12 Years	Yes	F	Very important considering high MMR in Nig the HIV/AIDS Part	Very important as the NGOs are very reliable, flexible, accepted and reached out to complement govt. efforts
14	Grass Root Women for sustainable Devt in Africa (GWASAA)	9 Years	Yes	F	Very important	It is a social necessity
15	NAWOJ, NATIONAL	10 Years	Yes	F	To make more women NGOs pursue their cause serious	It will go a long way in highlighting the danger of it.
16	National Council of Woman's Societies Abuja Nig.	20 Years	Yes	F	A very welcome Idea	It will improve the living standard of the society especially women
17	SWAAN	10 Years	Yes	F	It will be a good idea as it will serve as a working document for NGOs	It very important because it will enable NGOs to reach more people to prevent the spread of this deadly disease that is spreading fast
18	The Adolescent Project (TAP) Nigeria	6 Years	Yes	F	It is inevitable, some NGOs will appreciate to be doing it	It is important Health institutions can not do it alone
19	COCIN - IRH	15 Years	Yes	M	It is inevitable, as some NGOs will be going into it new.	It is relevant Health institutions can not do it alone
20	Onji Women Organisation (Onji WIHV)	20 Years	Yes	F	Extra important as RH is a pressing need for every women/men/children	As important as integrating R/H into other activities of NGO not an it already
21	Women and Development Movement (WADEM)	10 Years	Yes	F	It is a right step to meet the need of our people	It is very necessary because of the rate HIV/AIDS is spreading
22	Women Health Organisation of Nigeria (WHON) &	10 Years	No	F	Very important it serves as a guide for models	Important it's a pandemic that requires all round action

	CONNOHPD					
23	Inter-Gender Jos	5 Years	Yes	F	It is a very good initiative	It is an excellent idea because the two have to go in pari parsu
24	Nursing & Midwifery Council of Nigeria	5 Years	Yes	F	It is a welcome idea - woman deserve the best	It is high time it happens because of the grass root connection
25	Muslim Sisters organisation of Nigeria	7 Years	Yes	F	Okay will help in the understanding of the projects	Fine-as long as NGO are not tailored to do the same
26	Inter-Gender Jos	5 Years	Yes	M	Good Idea	Good Idea
27	Rahama Women Development Bauchi	5 Years	Yes	F	Carry along weak ones (Identify & Encourage)	Good Idea
28	Adolescent Health & Information Projects (AHIP)	33 Months	No	F	Highly Needed	The most important and required step yet
29	COWAN, JOS	11 Years	Yes	F	It is really very important	HIV/AIDS activities should be integrated not only in health but in all other activities

Part II Evaluation

S/N	Importance of Integrating HIV/AIDS with non health NGO	The group manual beneficiary	Rating of advance Africa Workshop	What you learn/gain in the Workshop
1	It is necessary	COWAN, FADU, NARWA, LAPO, WHEEL etc.	Very successful	A lot
2	HIV/AIDS is more than a health problem	All groups working on Women's reproductive health / rights.	It was fruitful	That any NGO no matter its focus can work in any area
3	Very Important	NGOS, GOVT., Donor agencies	Very Good	Yes
4	To stem the spread of the disease	All NGOs	Good	Yes
5	Every body in the country	Every NGO	A new dimension	Yes
6		RH and Non RH		A lot of thing
7	Good initiative	All groups involve	Excellent	Yes and a lot
8	It will enable the information to reach a under audience	All the groups	Best	Yes
9	This will be very useful		Excellent	So many that I feel I know nothing before I participated in the workshop
10	Very Important	Every body healer and non healer	Excellence	Plenty
11	It will broaden outreach	Health involved focused NGOs etc	Has a knack for being in the right place RH	Yes
12	Cross-cutting need	All that can apply / Adapt it	Fair	Need to scale-up approaches by actual participation

13	Very important as the NGOS are very reliable, flexible, accepted and reached out to complement govt. efforts	Every group	Very high	Yes, steps to follow in carrying out integration of RH project, strength and weaknesses of various categories of percentage
14	It cannot be avoided	All NGOS in Nigeria the ministers researchers	Good	Yes
15	More people will fight the scourge	All group committed to women issues	Excellent	Developing modules
16	It will be a welcome idea, in order to change lives	Order to change lives, Nat. Council of Women's Societies	Timely	Yes networking motivation
17	NGOs working on Health & non-health issues sponsors, ministry of health more coverage networking.	More coverage networking disease that is spread fast	A	Yes from sharing experience from other working on reproductive & non reproductive issues about integration and collaboration of efforts to have more impact
18	Greater coverage is ensured	All the groups that don't have the experience	Very good	The concept of integration of rendering services
19	Greater Coverage is ensured	All the groups that don't have the experience	Very good	Concept of integration of services
20	Other activities will be boosted and more meaningful	All groups but more especially the faith foundation group	Very motivating	Much
21	If they will employ professional its will be good	All groups	Excellent	Much
22	Equally important	All Groups	Fair I understand the obstacles they faced.	Yes

23	It is nice people get informed	Stake holders policy makes adolescents	Excellent	Yes Legitimazers / Gate keepers
24	It is proper awareness will be more	The non - health NGOs	It's a beautiful start	Many things networking, integration and communication and most importantly, its maturity and high sense of humanity displayed by Judith walker- she is my mentor.
25	Fine also if peopled values are protected	All groups who are interested in Networking	Has high potentials	A lot on Networking
26	Good Idea	RH and Non-RH NGOS		A lot of things
27	Excellent view	R/H, Education group	Very Good	Yes, many things learnt
28	The most important and required step yet	All the groups enumerated during this workshop	Very Good	A lot
29	It should be a must	All groups	Very interesting	Very much and still need to learn more.